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CLERK, U.S. DISTRICT COURT
ST. PAUL, MN

UNITED STATES DISTRICT COURT
DISTRICT OF MINNESOTA

Joseph Alan James
William Marks
vs. Tony Allen Stowell

Plaintiff(s),

Case No. 20-cv-1240 PJS/HB
(To be assigned by Clerk of District
Court)

DEMAND FOR JURY
TRIAL

YES ☒ NO ☐

Defendant(s).

(Enter the full name(s) of ALL plaintiffs
and defendants in this lawsuit. Please
attach additional sheets if necessary.)

BOP - FMC Lexington
Warden Francisco Quintana

EMPLOYMENT DISCRIMINATION COMPLAINT

PARTIES

1. List your name, address and telephone number. Do the same for any additional plaintiffs.

a. Plaintiff Joseph Alan James, William Marks
Tony Allen Stowell

Name

FMC - Lexington

Street Address

Federal Medical Center

County, City

P.O. Box 14500

State & Zip Code

Fayette County Lexington, KY 40512

Telephone Number

1-859-255-6812

2. List all defendants. You should state the full name of the defendant, even if that defendant is
a government agency, an organization, a corporation, or an individual. Include the address

BOP - Bureau of Prisons

FMC - Lexington

Warden Francisco Quintana

SCANNED

MAY 22 2020

U.S. DISTRICT COURT ST. PAUL

where each defendant may be served. Make sure that the defendant(s) listed below are identical to those contained in the above caption.

a. Defendant No. 1

Name Bureau of Prisons

Street Address

County, City

State & Zip Code washington DC

b. Defendant No. 2

Name warden Francisco Quintana

Street Address 3301 leestown RD

County, City Fayette Lexington

State & Zip Code Kentucky 40512

NOTE: IF THERE ARE ADDITIONAL PLAINTIFFS OR DEFENDANTS, PLEASE PROVIDE THEIR NAMES AND ADDRESSES ON A SEPARATE SHEET OF PAPER.

Check here if additional sheets of paper are attached: ☐

Please label the attached sheets of paper to correspond to the appropriate numbered paragraph above (e.g., Additional Defendants 2.c., 2.d., etc.)

JURISDICTION

The Court has jurisdiction over this action under 28 U.S.C. § 1331.

3. This employment discrimination lawsuit is based on (check only those that apply):

- a. ☐ Title VII of the Civil Rights Act of 1964, as amended, 42 U.S.C. §§ 2000e, *et. seq.*, for employment discrimination on the basis of race, color, religion, gender, or national origin. **NOTE:** *In order to bring suit in federal district court under Title VII, you must first obtain a right to sue letter from the Equal Employment Opportunity Commission (EEOC).*
- b. ☐ Age Discrimination in Employment Act of 1967, as amended, 29 U.S.C. §§ 621, *et. seq.*, for employment discrimination on the basis of age (age 40 or older). **NOTE:** *In*

order to bring suit in federal district court under the Age Discrimination in Employment Act, you must first file charges with the Equal Employment Opportunity Commission (EEOC).

- c. ☐ Americans with Disabilities Act of 1990, as amended, 42 U.S.C. §§ 12101, *et. seq.*, for employment discrimination on the basis of disability. **NOTE:** *In order to bring suit in federal court under the Americans with Disabilities Act, you must first obtain a right-to-sue letter from the Equal Employment Opportunity Commission (EEOC).*
- d. ☐ Rehabilitation Act of 1973, as amended, 29 U.S.C. §§ 701, *et. seq.*, for employment discrimination on the basis of a disability by an employer which constitutes a program or activity receiving federal financial assistance. **NOTE:** *In order to bring suit in federal district court under the Rehabilitation Act of 1973, you must first file charges with the appropriate Equal Employment Office (EEO) representative or agency.*
- e. ☒ Other (Please describe.) *I and other inmates at FRC - Lexington are being neglected and abused, 8th Amendment violations for cruel and unusual punishment, being threatened to be shot when we ask to speak to staff. cross contamination by staff no cleaning supplies, no soap or hand sanitizer in Restrooms overcrowded cells and 8th cells loaded with the sick and dying. only given tylenol, Inmates being attacked and abused Repeatedly*
4. If you are claiming that the discriminatory conduct occurred at a location other than the defendant's address above, please provide the following information on where the conduct occurred:

(Street Address)

(City/County)

(State)

(Zip Code)

5. When did the discrimination occur? Please give the date or time period:

ADMINISTRATIVE PROCEDURES

6. Did you file a charge of discrimination against the defendant(s) with the Equal Employment Opportunity Commission or other federal agency?
- a. ☐ Yes Date filed: _____
- b. ☐ No
7. Have you received a Notice of Right-to-Sue Letter?

- a. ☐ Yes If yes, please attach a copy of the letter to this complaint.
- b. ☐ No

NATURE OF THE CASE

8. The conduct complained of in this law suit involves (check only those that apply):

- a. ☐ Failure to hire me
- b. ☐ Termination of my employment
- c. ☐ Failure to promote me
- d. ☐ Failure to accommodate my disability
- e. ☐ Terms and conditions of employment differ from those of similar employees
- f. ☐ Retaliation
- g. ☐ Harassment
- h. ☒ Other conduct (please specify): *STAFF CROSS CONTAMINATION, threatened to be shot by STAFF with guns, warden delay in testing BOP STAFF. Delayed actions by warden Quintana and not getting STAFF tested contributed to inmates catching virus and causing inmates deaths when they could be prevented*
- i. Did you complain about this same conduct in the charge of discrimination, referred to in number 6 above?

☒ Yes ☐ No

9. I believe that I was discriminated against because of my (check all that apply):

- a. ☐ Race
- b. ☐ Religion
- c. ☐ National origin

- d. ☐ Color
- e. ☐ Gender
- f. ☐ Disability
- g. ☐ Age (my birth year is: _____)
- h. ☒ Other (please specify): Because I am and Inmate the
DOP Feels that my life is worthless

i. Did you state the same reason(s) in the charge of discrimination, referred to in number 6 above?

☐ Yes ☐ No

Describe in the space provided below the basic facts of your claim. The description of facts should include a specific explanation of the conduct that you believe is discriminatory and describe how each defendant is involved in the conduct (i.e. how, where, and when). Each paragraph must be numbered separately, beginning with number 10. Please write each allegation of discrimination in a separately numbered paragraph.

10.

Original Complaint is enclosed
More then 30 People are willing
to Testify in Federal court before
a Jury trial to these allegations
that are true and Fact. the
motion Recieved by the Courts on May 11th 2020
is are statement to the court

Attach additional sheets of paper as necessary.

Check here if additional sheets of paper are attached: ☐

Please label the attached sheets of paper as Additional Facts and continue to number the paragraphs consecutively.

REQUEST FOR RELIEF

State briefly and exactly what you want the Court to do for you and the amount of monetary compensation, if any, you are seeking.

I ask For 200 million Dollars
1 million for each Inmate who served time at FMC-Lexington
during the Covid-19 corona virus outbreak at this prison
and 50 million for a fund for BoP staff members
who have been affected by the corona Covid-19 virus
If staff members have died I request funds be given to their
family to help support them.

Date:


Signature of Plaintiff

Mailing Address

Joseph Alan James
#16799-041
FMC-Lexington
Federal medical center
P.O. Box 14500
Lexington, Ky 40512

Telephone Number

Note: All plaintiffs named in the caption of the complaint must date and sign the complaint and provide his/her mailing address and telephone number. Attach additional sheets of paper as necessary.